

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

JUL 1 6 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s) Robert Clegg, Debra Vanderbeek, Periklis Karoutas, Leann Moccia

II. Name of lobbyist	's partnership, firr	n or corporation, if any	<i>"</i> :	
	Legislative Solution	ons, L.L.C.		
(Na	me of partnership, firr	n or corporation)		
P	O. Box 10724	Bedford	NH	03110
Business Address: (S	treet)	(Town/City)	(State)	(Zip Code)
() <u>603- 860-36</u>	82 ()	e-mail senclege	g@aol.com
(Telephone)		(Fax)		
		e – file separate reports are not attributable to		may file a separate report for
☐ All reportable tra	nsactions occurring	in the months prior to th	e reporting date relative to	the following client:
		nce for Solar Choice		
<u>OR</u>	(Full Name of Clie	nt as it appears on the Lobb	yist Registration Form)	
		yist (including the lobby	vist's family), or the lobbyi	ing firm listed below which are
IV. Date of Report	April 25, 2018 [July 25, 2018	
Reports cover: acti	vity from date of regis October 31, 201 activity from 7/1/18	8 🗆	activity from 4/1/18 to 6/30/. January 30, 2019 activity from 10/1/18 to 12/.]
			ransactions made since Secretary of State's Office,	
VI. Check if additio	nal renorts are atta	iched:		
			Addendum A- Fees and	Expenses
If you have paid Expense Reimbursen	an honorarium or re	imbursed expenses, you	must file Addendum B- F	Report of Honorariums or
•		made political contribut	ions, you must file Addend	dum C- Political Contributions
Sworn Statement/A: I have read RSA 15, and complete to the bound of the statement of lobbyis Robert Clegg	RSA 15-B, RSA 14- pest of fly knowledg	C and RSA 664 and her	July 19, 2018	e foregoing information is true Date)

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Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

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1. Name of Lobbyist(s) Robert Clegg, Debra Vanderbeek, Periklis Karout	as, Leann Moccia, Chris Herr
II. Name of lobbyist's partnership, firm or corporation, if any:	
Legislative Solutions, L.L.C. (Name of partnership, firm or corporation)	
III. Name of Client The Alliance for Solar Choice	Date
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a) \$ 9,000.00
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ 9,000.00 ear)
c) Total of all fees received to date (Add lines a and b)	c) \$ <u>18,000.00</u>
 d) Indicate the amount of any such fees that are due, but have not yet been paid 	d) \$ <u>0</u>
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to rep fees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	elient and if expenditures are made by hay be filed for the lobbyist(s)/firm. aggregate total of all expenses paid penses; (b) the aggregate total of all e: meals purchased during a business is than \$10 that is given to the person d with a value of \$25.00 or less); and rting period of greater than \$25.00 for the of greater than \$25, purchase of a r than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$9,000.00
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ <u>0</u>
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ <u>0</u>

d) Total expenses for this reporting period	d) \$ 9,000.00
(Add lines a, b and c)	
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ <u>9,000.00</u>
f) Total of all expenses year to date	f) \$ <u>18,000.00</u>
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	n that the foregoing information
is true and complete to the best of my knowledge and belief.	
Hely Cleen	July 19, 2018
(Signature of lobbyist)	(Date)
Robert Clegg	
(Print Name of lobbyist)	

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State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

(Print Name of lobbyist)

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Name of Lobbying partnership, firm, or corporation: Legislative Solutions, L.L.C. Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any The Alliance for Solar Choice particular client): Date of Report (check one): July 25, 2018 🐧 April 25, 2018 □ October 31, 2018 January 30, 2019 I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted): Addendum A(s). Addendum B(s). Addendum C(s). I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief. Debra Vanderbeek

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

JUL 1 6 2018 NEW HAMPSHIRE DEPARTMENT OF STATE

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying pa	rtnership, firm, or corpo	oration: Legislative Solutio	ns, L.L.C.		
Name of Client (leave	blank if Statement is fo	or the partnership, firm, or	corporation and not related to any		
particular client):	cular client): The Alliance for Solar Choice				
Date of Report (check	one):				
April 25, 2018 □	July 25, 2018 🗆	October 31, 2018 🗆	January 30, 2019 □		
	-		nd Expenses described above, and umber of Addendum forms being		
Addendum A(s).				
Addendum B(s).				
Addendum C(s).				
•	m that the foregoing in fmy knowledge and be	lief.	nt and each Addendum is true and		
(Signature of lobbyist)			(Date)		
/					
Periklis Karoutas					
(Print Name of lobbyi	st)				

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

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NEW HAMPSHIRE	
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Name of Lobbying par	tnership, firm, or corpo	oration: Legislative Solutio	ns, L.L.C.		
			corporation and not related to an		
particular client):	ular client): The Alliance for Solar Choice				
Date of Report (check	one):				
April 25, 2018 □	July 25, 2018 🗆	October 31, 2018 🗆	January 30, 2019 □		
			nd Expenses described above, an umber of Addendum forms bein		
Addendum A(s	3).				
Addendum B(s).				
Addendum C(s).				
complete to the best of	0 0	lief.	nt and each Addendum is true an		
(Signature of lobbyist)			(Date)		
Leann Moccia (Print Name of lobbyis	t)				